

CLAIMS ONLY							Application Number 10/648523		Filing Date		
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Total Indep	4										
Total Depend	45										
Total Claims	49										
Total Indep	2										
Total Depend	10										
Total Claims	12										

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